

## **Home and Community Based Services KEESM 8200**

- ✓ With the exception of financial eligibility determination, case managers have all responsibility for determining eligibility for HCBS programs including developing the plan of care (Physical Determination)
- ✓ EES staff have responsibility for financial eligibility determination (Financial determination)
- ✓ Both have responsibility for communicating pertinent information
- ✓ HCBS eligibility is based on:
  - Functional or medical need
  - Medicaid eligibility
  - Age of the consumer
  - Availability of service providers
  - Budget and waiver constraints

### **DETERMINATION OF ELIGIBILITY**

- ✓ Referral for HCBS services (oral or written).  
May come from:
  - EES worker (use ES-3160 or KAECSSES notice I-006)
  - Other service organizations
  - Consumer or consumer's family
- ✓ If consumer has not applied for Medicaid, must be referred to SRS
- ✓ Completion of assessment. If assessment completed within the previous 365 days, the consumer does not have to be re-assessed unless there has been a significant change in condition.

## **FINANCIAL ELIGIBILITY DETERMINATION**

- ✓ EES worker completes
- ✓ Case manager provides an assessment and choice date, a tentative start date and Plan of Care with approximate costs
- ✓ EES worker provides case manager with:
  - Eligibility determination information
  - Client obligation information
  - Written verification of Medicaid eligibility before services are initiated
- ✓ Financial eligibility criteria include:
  - One month eligibility base periods
  - Only income and resources of the HCBS consumer are considered
  - \$20 AABD disregard allowed
  - \$65 + half the remainder allowed as a deduction for earned income
  - Protected Income Level = \$727
  - Begins with either the “choice” or “assessment” date depending on which waiver is being utilized (unless there is a waiting list).

## **DETERMINING ELIGIBILITY AND SERVICE NEEDS**

- ✓ Consumer can receive HCBS if:
  - Meets eligibility requirements for waiver
  - Cost of HCBS plan of care is less than average Medicaid reimbursement to an NF or institution
  - HCBS/FE and HCBS/PD have cost cap exceptions

## **EES WORKER RESPONSIBILITIES**

- ✓ Determining Financial Eligibility
- ✓ Communication with Case Managers and Independent Living Counselors (use ES-3161 or KAECSES notice I-007)
- ✓ Making case changes and coding LOTC as soon as notification of the beginning date of HCBS services is received from the case manager.